New Jersey Department of Environmental Protection General Services Examinations & Licensing Unit

OFFICE USE OF	NLY
App. Fee	_
RA	_
Date	
Initial Lic. Fee	
RA	-
Date	

APPLICATION FOR NEW JERSEY PUMP INSTALLER LICENSING EXAMINATION

INSTRUCTION SHEET

Enclosed is an application and study material for the New Jersey Pump Installer Licensing Examination.

- ·All applicants must circle the appropriate test month.
- •All applicants must attach a copy of their high school diploma or GED certificate to the application.
- All applications and your two reference questionnaires, FORM ADM-166B, must be completely filled out and notarized or your application will be rejected.
- In order to qualify for the New Jersey Pump Installer License you <u>must</u> have at least one year
 of experience in pump installation work as of the signature date on the application.

A non-refundable \$35.00 check made out to the "Treasurer, State of New Jersey" should be enclosed with the application and the completed package sent to the following address:

New Jersey Department of Environmental Protection Examinations & Licensing Unit PO Box 441 Trenton, New Jersey 08625-0441

Further notice will be sent to you after your application is reviewed and accepted, indicating the date, time and location for your scheduled examination. A location map for the testing center will be included with the notification.

NOTE: NO EXCEPTIONS FOR LATE APPLICATIONS Applications must be postmarked by the appropriate closing date.

Regularly scheduled examinations will be held during the second or third week of each test month.

		TEST MONTH	APPLICATION CLOSING DATE
(Please circle the appropriate month	-	June	May 1
you wish to be tested)	7	December	November 1

APPLICATION FOR NEW JERSEY PUMP INSTALLER'S LICENSING EXAMINATION

under the provisions of N.J.S.A. 58:4A-4.1 et seq.

(PLEASE TYPE OR PRINT)

A. GENERAL INFORMATION			
Name		Age	
Address Street, 7			
Street, 7	Town, State & Zip	Code	
Daytime/Work Phone No. () Area Code	<u> </u>	*Social Security Number	
The social security number is required of all indiv 6.44e). Failure to provide this information will re	iduals applying fo sult in an automa	or any license in accordance with Child : tic rejection of your application.	Support Act (N.J.S.A. 2A:17
Applicant is subject to examination before the New I he provisions of N.J.S.A, 58:4A-10.	Jersey State Well I	Orillers and Pump Installers Examining a	nd Advisory Board under
Did you graduate from high school or possess high school equivalency certificate?	Yes] No Year Graduated/GED	obtained
A copy of your high school diploma or GED certification is any colleges, universities, vocational and/or bus			d.
NAME AND LOCATION OF SCHO	OL	MAJOR AREA OF STUDY	DATES ATTENDED
			From
			То
	51		From
			То
Fill in your prior work experience in pump installisted. NAME, ADDRESS &TELEPHONE # OF EMPLOYER	lling. All applican	its must indicate the month, day and year sheets if necessary) OUR DUTIES & RESPONSIBILITIES	for each employment date(s
			From
			То
			From
			То
			From
			То
			From

To

C. VERIFICATION OF WORK EXPERIENCE

Notary Public

Applicant must provide the names of at least two references who can verify your pump installation work experience listed above in Section B of this application. One of your two references must be either a NJ licensed Master or Journeyman Well Driller, or a NJ licensed Pump Installer. These two references must complete and sign the reference questionnaires, FORM ADM-166B.

NAME	ADDRESS	PHONE NO.	N.J. WELL DRILLE PUMP INSTALLED REGISTRATION #
		С Э	
		()	
e undersigned applicant, certif	y under penalty of law that the inform	nation provided in this	document is true,
ne undersigned applicant, certif urate and complete. I am av	y under penalty of law that the inform vare that there are significant civil an on, including fines and/or imprisonn Signature of A	nd criminal penalties fo nent.	document is true, or submitting false, ————————————————————————————————————
rurate and complete. I am av	vare that there are significant civil an on, including fines and/or imprisonn ———————————————————————————————————	nd criminal penalties fo nent.	or submitting false,

(Official Seal)

New Jersey Department of Environmental Protection General Services Examination & Licensing Unit PO Box 441, Trenton, NJ 08625-0441

PUMP INSTALLER LICENSING EXAMINATION

REFERENCE QUESTIONNAIRE AND VERIFICATION OF EXPERIENCE

EXPERIENCE QUESTIONNA	AIRE		
1. How many years/months have y	ou supervised the applicant i	n pump installation activities?	
FROM: Month	Year	TO: Month	Year
NOTARIZED OATH OF REFERE	ENCE		
I hereby certify that the information	provided in this questionnair	re is true to the best of my knowled	ge and belief.
*		Name of Ref	erence (Please Print)
	6		
	50	Signatu	era of Pataranaa
	5.0	Signatu	ire of Reference
		N.J. Well Drille	er's/Pump Installer's
		N.J. Well Drille Registration #	
worn to and subscribed		N.J. Well Drille Registration #	er's/Pump Installer's
worn to and subscribed efore me this da	ay	N.J. Well Drille Registration #	er's/Pump Installer's
worn to and subscribed efore me this da		N.J. Well Drille Registration #	er's/Pump Installer's

New Jersey Department of Environmental Protection General Services Examination & Licensing Unit PO Box 441, Trenton, NJ 08625-0441

PUMP INSTALLER LICENSING EXAMINATION

REFERENCE QUESTIONNAIRE AND VERIFICATION OF EXPERIENCE

LEASE PRINT applicant's Name			
EXPERIENCE QUESTIONNAIRE			
1. How many years/months have you su	pervised the applicant is	n pump installation activities?	
FROM: Month	Year	TO: Month	Year
. NOTARIZED OATH OF REFERENCE	2		
I hereby certify that the information provi	ided in this questionnais	e is true to the best of my knowledg	e and belief.
		Name of Refe	erence (Please Print)
	50		
		Signatu	re of Reference
		N.J. Well Drille	er's/Pump Installer's
		Registration # (if app	licable)
worn to and subscribed efore me this day			
fA.D. 20			
		(Official Seal)	
Signature of Notary Public			

REMINDER:

- •Have you completed all appropriate sections of your application?
- •Have you indicated which test month you wish to take your examination?
- •Have you attached a copy of your high school diploma or GED certificate?
- ·Have you signed and notarized your application?
- •Have you attached your two signed and notarized reference questionnaires, FORM ADM-166B?
- •Have you attached your non-refundable \$35.00 application fee payable to "Treasurer, State of New Jersey"?